

ARIZONA DEPARTMENT OF INSURANCE **CASH** RELEASE FORM

You must complete this form to withdraw cash from Union Bank. Select one Reason for Release Request at the bottom of the form. For Excess/Partial or Substitution release transactions, requests are processed after Account Value is confirmed. Please contact Union Bank if you have any questions.

MAIL	MUFG Union Bank, N.A. 350 California Street, 17th Floor San Francisco, CA 94104	FAX	(877) 837-3292
		PHONE	(800) 962-1784

Union Bank Account Name:	Union Bank Account Number:
Company Contact:	Company Contact Telephone:

Type of Release Requested (check method of delivery and complete detail on security)

<input type="checkbox"/> Cash via Check	<input type="checkbox"/> Cash via Wire
<input type="checkbox"/> ACH	
For Federal Reserve securities or DTCC Eligible securities, provide asset detail information below.	Amount To be Released:
	:

Check Delivery Instructions (Address):	Cash Delivery Instructions:	
	Bank Name	
	ABA	
	For Credit to	
	For Further Credit to	

REASON FOR RELEASE REQUEST- check one

- Total Release – Request to withdraw all securities in the account (See Note below)
- Excess/Partial Release – Request to withdraw funds in excess of required Minimum Account Balance
- Substitution Release – Request to replace an existing security with another security.

Note: A Total Release requires prior approval from the Arizona Department of Insurance. If we have not received their prior approval, your request will be forwarded to them.

Authorized Signature on File with Union Bank

Printed Name & Title

Date